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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: Black Hills Pioneer		2. DATE: 9-21-18
3. FREQUENCY OF ISSUE: Daily	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 306	3B. ANNUAL SUBSCRIPTION PRICE $: various
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): P.O. Box 7, Spearfish, Lawrence County, S.D., 57783		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): P.O. Box 788, Hastings, NE., 68901		
6. FULL NAME OF PUBLISHER: Letitia Lister		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME — COMPLETE MAILING ADDRESS Seaton Publishing Co., Inc. P.O. Box 7, Spearfish, SD, 57783		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	4350	4382
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	3376	3382
2. Mail Subscription (Paid and or requested)	345	360
3. Paid Electronic Copies	167	167
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	3888	3909
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	75	75
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	3963	3984
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	157	162
2. Return from News Agents	230	236
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	4350	4382

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Letitia Lister
(Signature)

Publisher
(Title)

State of South Dakota)
§
County of Butte)

Sworn to before me this 21st day of September, 20 18

Notary Public

My commission expires: August 29, 2023

(Seal)

Form: SOS REC 05 9/2016